



OFFICE OF THE COMMISSIONER OF THE REVENUE
CITY OF FREDERICKSBURG, VIRGINIA

Phone (540) 372-1004

MONTHLY REMITTANCE OF TAX ON

MEALS

TRADE NAME _____ FEIN: _____
CORP NAME _____
ADDRESS _____
CITY STATE ZIP _____

1. Gross receipts for the month of _____ 20_____ \$ _____
2. Less allowable deductions (attach list)\$ _____
3. Balance Taxable.....\$ _____
4. 6% tax on item 3\$ _____
5. Less seller's discount on item 4 (3% OR \$100, whichever is **LESS**)
DISCOUNT AVAILABLE ONLY WHEN FILED & PAID ON TIME\$ _____
6. Balance – total tax less sellers discount.....\$ _____
7. Penalty for late payment – 10 % of item 6 or \$2.00 (WHICHEVER IS GREATER)..\$ _____
- 8 Total Tax and Penalty\$ _____
9. 10 % per annum interest on tax and penalty\$ _____
10. Total Tax, Penalty and Interest due and paid herewith.....\$ _____

MAKE CHECK PAYABLE TO CITY TREASURER

DECLARATION OF SELLER:

I hereby swear or affirm that the amounts listed above are true, correct and complete to the best of my knowledge and belief for the period stated above.

Date _____ Signature _____

Phone No. _____ Title _____

INSTRUCTIONS: **Mail** original copy with check payable to City Treasurer on or before the
20th day of the month following the month being reported, **to:**

Commissioner of the Revenue, P O Box 644, City Hall, Fredericksburg, VA 22404-0644

For Office Use

Received by:

Date Received in Office

Commissioner of the Revenue